

PART B—ISSUE FEE TRANSMITTAL

1250-142 B

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1. CORRESPONDENCE ADDRESS



PARKHURST WENDEL & ROSSI
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15M2/0823

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

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 Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/390,953	02/21/95	007	HESS, B	1513 08/23/95
First Named Applicant KUBO, MIKIKO				

TITLE OF INVENTION

PROTECTIVE LAYER TRANSFER FILM AND IMAGE-PRINTED MATTER

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1	DAIN-300	503-227.000	057	UTILITY	NO	1250.00 \$1210.00	11/24/95

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4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 PARKHURST WENDEL & ROSSI

2 _____

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060 JJ 12/08/95 08390953

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(Authorized Signature) (Date) Charles A. Wendel; Reg. No. 24,453 11-22-95

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